

# Finalized Performance Standards for PY 2023 ESRD QIP Clinical Measures



Measure		Achievement Threshold (15th percentile**)	Median (50th percentile**)	Benchmark (90th percentile**)
Vascular Access Type (VAT)	Standardized Fistula Rate	53.29%	64.36%	76.77%
	Catheter Rate	18.35%	11.04%	4.69%
	Kt/V K (dialyzer clearance of urea) *t (dialysis time)/V (patient's total body water)	94.33%	97.61%	99.42%
	Hypercalcemia	1.54	0.49	*0.00
	Standardized Readmission Ratio (SRR)	*1.268	*0.998	*0.629
	National Healthcare Safety Network Bloodstream Infection (NHSN BSI)	1.193	0.516	0
	Standardized Hospitalization Ratio (SHR)	*1.248	0.967	0.670
	Percentage of Prevalent Patient Waitlisted (PPPW)	*8.12%	*16.73%	*33.90%
	In-Center Hemodialysis Consumer Assessment of Healthcare Providers and Systems (ICH CAHPS)	Nephrologists' Communication and Caring	58.20%	67.90%
Quality of Dialysis Center Care and Operations		54.64%	63.08%	72.66%
Providing Information to Patients		74.49%	81.09%	87.8%
Overall Rating of Nephrologists		*49.33%	*62.22%	*76.57%
Overall Rating of Dialysis Center Staff		50.02%	63.37%	78.3%
Overall Rating of the Dialysis Facility		54.51%	69.04%	83.72%

\* Indicates final performance standards for those measures for PY 2022. In accordance with our longstanding policy, we are finalizing those numerical values for those measures for PY 2023 because they are higher standards than the PY 2023 numerical values for those measures.

\*\*Of National Performance.